



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



CONFIRMATION NO. 4941

Bib Data Sheet

SERIAL NUMBER 11/255,492	FILING OR 371(c) DATE 10/21/2005 RULE	CLASS 602	GROUP ART UNIT 3761	ATTORNEY DOCKET NO. ARG 0027 CIP
-----------------------------	--	--------------	------------------------	--

## APPLICANTS

A. Bartholomew Flick, Lakemont, GA;  
 Gregg Silver, Chicago, IL;  
 Thomas Miller, Willowbrook, IL;

\*\* CONTINUING DATA \*\*\*\*\* *OL KCJ*

This application is a CIP of 10/421,370 04/23/2003 which is a CIP of 09/531,245 03/21/2000 PAT 6,861,570  
 and is a CON of PCT/US98/19689 09/22/1998  
 This application 11/255,492  
 is a CIP of 08/707,779 09/03/1996 PAT 7,005,556  
 which is a CIP of 08/524,134 09/05/1995 ABN  
 and is a CIP of 08/623,046 03/28/1996 PAT 5,814,094  
 This application 11/255,492  
 is a CIP of 10/660,209 09/11/2003  
 which is a CON of 09/531,245 03/21/2000 PAT 6,861,570  
 This application 11/255,492  
 is a CIP of 09/613,961 07/11/2000  
 which is a CIP of 08/935,026 09/22/1997 PAT 6,087,549

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *None KCJ*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 11/15/2005

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY GA	SHEETS DRAWING 15	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>Examiner's Signature</i> <i>KCJ</i>	<i>Initiate</i>			

## ADDRESS

23579

## TITLE

Medical device

FILING FEE RECEIVED 1040	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
-----------------------------	---	--

<input type="checkbox"/>	Other _____
<input type="checkbox"/>	Credit